

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO 10749330

FILING DATE 12-31-03

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4						
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39	1					
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49						
50						
TOTAL IND.	4					
TOTAL DEP.	109					
TOTAL	113					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL						